PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

	For Office Use Only (Revised 7-1-15) Zoning Official Building Official
	AP# 53706 Date Received 275/22 By MG Permit #
	Flood Zone Development Permit Zoning Land Use Plan Map Category
	Comments
	FEMA Map# Elevation Finished Floor River In Floodway
١,	Recorded Deed or Property Appraiser PO 🗷 Site Plan 🗆 EH # = Well-letter OR
	Existing well — Land Owner Affidavit Installer Authorization — FW Comp. letter App Fee Paid
١,	→ DOT Approval ☐ Parent Parcel #
	= Ettisville Water Sys & Assessment <u>Dwbd</u> = Out County In County & Sub VF Form
Pi	operty ID # 30-5s-17-09456-003 SubdivisionLot#
	New Mobile Home_X Used Mobile Home MH Size_32x76_ Year_2022
	Applicant Sonya North Phone # 863-517-5701
ш	Address 3311 SW State Rd 247 Lake City FI 32025
	Name of Property Owner David + Leslie Greene Phone# 384- 755-5594
8	911 Address SW Tustenuggee Ave Lake City FI 32024
×	Circle the correct power company - FL Power & Light - Clay Electric
	(Circle One) - <u>Suwannee Valley Electric</u> - <u>Duke Energy</u>
	Prior 9 Amende Condere
	Name of Owner of Mobile Home Bryan & Amanda Sanders Phone #386-623-4358 Address 7928 SW Tustenuggee Ave Lake City FI 32024
	Relationship to Property Owner daughter
	Current Number of Dwellings on Property
	Lot Size 474 × 1(96 Total Acreage 27.8
	Do you : Have Existing Drive or Private Drive or need Culvert Permit (Currently using) or (Blue Road Sign) or need (Putting in a Culvert) or Culvert Waiver (Circle one) (Not existing but do not need a Culvert)
	Is this Mobile Home Replacing an Existing Mobile Home NO
	Driving Directions to the Property Lon US-4415, Lon US-415, Ron
	Sw Tustenungee Ave, property on R
	7
	Name of Licensed Dealer/Installer Whert Sheppard Phone #386-623-2203
	Installers Address 6335 SE CIC 245 Cake City Fl 32024
ш	License Number <u>THIDAS384</u> Installation Decal # <u>84443</u>

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

			*					
APPLICATION NU	VIBER		CONTRACTOR LIN	pert Shepp	ard	PHONE 384	-623-2	<i>30</i> 3
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT								
In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.								
Any changes, s start of that se	the permitte sbcontracto	ed contractor is re or beginning any w	sponsible for the corre vork. Violations will res	cted form being sult in stop work	submitted t orders and/	o this office pa or fines.	rior to the	
ELECTRICAL	Print Name Glenn Whithington Signature Menn Whattury True License #: EC 1300 2957 Phone #: Qualifier Form Attached							
MECHANICAL/	Print Name	2		Signature		CONTRACTOR OF THE PARTY OF THE		
A/C				Phone #:				
Qualifier Forms cannot be submitted for any Specialty License.								
Specialty L	cense	License Number	Sub-Contractors Pr	inted Name	Sub-C	Contractors Sign	nature	
MASON								
CONCRETE FIN	ONCRETE FINISHER							

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	CONTRACTOR LUDER+ Shepparo	PHONE 386-623 2203
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THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is <u>REQUIRED</u> that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name	Signature
	License #:	Phone #:
	Qualifier Form Attached	
MECHANICAL/	Print Name ROUAL Bonos	Signature \$2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
v/c	License #:CAC1817658	CIED CILL - TO -

F. S. 440.103 Building permits; identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 4/27/2017

Columbia County Property Appraiser Jeff Hampton

Parcel: << 30-5S-17-09453-003 (34694) (>>)

2022 Working Values updated: 2/17/2022

	Tree!					 	(0.00.
Owner	& P	rop	erty	/ In	fo		

roperty Info	Result: 1 of 1			
Owner GREENE DAVID R GREENE LESLIE W 7928 SW TUSTENUGGEE AVE LAKE CITY, FL 32024				
7928 SW TUSTENUGGEE Ave, LAKE CITY				
FT TO W R/W CR-131 FC FT, S 474.56 FT, E 2552.6	OR POB, CONT 32 FT TO W RA	W 2551.64 N CR-131 N		
27.8 AC	S/T/R	30-5S-17		
IMPROVED AG (5000)	Tax District	3		
	GREENE LESLIE W 7928 SW TUSTENUGG LAKE CITY, FL 32024 7928 SW TUSTENUGG COMM NE COR OF SEC, FT TO W R/W CR-131 FC FT, S 474.56 FT, E 2552.6 ALONG R/W 474.56 FT T 845-1757. 27.8 AC	GREENE DAVID R GREENE LESLIE W 7928 SW TUSTENUGGEE AVE LAKE CITY, FL 32024 7928 SW TUSTENUGGEE Ave, LAK COMM NE COR OF SEC, RUN S 1135.4 FT TO W R/W CR-131 FOR POB, CONT FT, S 474.56 FT, E 2552.62 FT TO W R/M ALONG R/W 474.56 FT TO POB. ORB 7 845-1757. 27.8 AC S/T/R		

*The <u>Description</u> above is not to be used as the Legal Description for this parcel in any legal transaction.
**The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property &	Asses	sment Va	lues		
2021 Ce	rtified \	/alues	2022 Working Values		
Mkt Land \$2,800		Mkt Land	\$2,80		
Ag Land		\$11,310	Ag Land		\$11,310
Building		\$135,822	Building		\$134,081
XFOB		\$4,293	XFOB		\$4,293
Just		\$225,020	Just		\$223,279
Class		\$154,225	Class		\$152,484
Appraised		\$154,225	Appraised		\$152,484
SOH Cap [?]		\$25,901	SOH Cap [?]	\$20,650	
Assessed		\$128,324	Assessed		\$131,834
Exempt	нх нв	\$50,000	Exempt	нх нв	\$50,000
		city:\$0 other:\$0	Total Taxable	or over a family define	y:\$81,834 city:\$0 other:\$0 \$106,834



▼ Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
9/15/1997	\$100	0845/1757	WD	V	U	03
8/1/1940	\$0	0796/1331	WD	V	11	11

Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	SINGLE FAM (0100)	1998	1951	2539	\$134,081

*Bidg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Extra reatures & Ou	t Buildings	(Codes)
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Code	Desc	Year Blt	Value	Units	Dims
0252	LEAN-TO W/O FLOOR	1998	\$552.00	276.00	23 x 12
0252	LEAN-TO W/O FLOOR	1998	\$644.00	322.00	23 x 14
0040	BARN,POLE	1998	\$863.00	345.00	23 x 15
0294	SHED WOOD/VINYL	1998	\$1,080.00	144.00	12 x 12
0252	LEAN-TO W/O FLOOR	1998	\$252.00	126.00	9 x 14



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS AGENT AUTHORIZATION

I, Robert Sheppard , give this authority and I do certify that the below						
referenced person(s) listed on t	his form is/are under my direct su	pervision and control and				
is/are authorized to purchase permits, call for inspections and sign on my behalf.						
Printed Name of Authorized Person	Signature of Authorized Person	Agents Company Name				
Sonya Nordh	Song north					
Dylan Hinson	•	-				
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.						
holder for violations committed I	nsing Board has the power and a by him/her or by his/her authorize esponsibility for compliance grante	ed person(s) through this				
Nobert Shappard License Holders Signature (Notarized) TH1025386 License Number Date						
NOTARY INFORMATION: STATE OF:FloridaCOUNTY OF:COUNTY OF:COUNTY OF:						
The above license holder, whose name is lovert Shepard, personally appeared before me and is known by me or has produced identification (type of I.D.) on this 23 ^M day of February, 2022.						
MOTARY'S SIGNATURE	-	Soal/Stamp)				

LISA L PAUL
Notary Public - State of Florida
Commission # GG 344051
My Comm. Expires Jun 11, 2023
Bonded through National Notary Assn.

Typical pier spacing Address of home being installed Installer: Lolout Manufacturer NOTE: I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. if home is a single wide fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home CHAMPION LAKE CITY FL 32024 lateral longitudinal SW TUSTENUGGEE AVE Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations) 0 arriage wall piers within 2' of end of home Installer's initials K.O Length x width License # IH 1025386 E 76X32 Rule 15C capacity bearing List all marriage wall openings greater than 4 foot and their pier pad sizes below. Other pier pad sizes (required by the mfg.) Perimeter pier pad size interpolated from Rule 15C-1 pier spacing table. Load S I-beam pier pad size 2000 psf 2500 psf 3000 psf 3500 psf 1500 psf 1000 pst Opening (sq in) Footer

Triple/Quad	Double wide	Single wide	Home installed Home is instal	New Home	Application Number:
	P		d to the M lled in acc	回	
Serial #	Installation Decal #	Wind Zone II	Home installed to the Manufacturer's Installation Manual Home is installed in accordance with Rule 15-C	Used Home	
FL261-00P	ecal#	_ Q	nstallation N Rule 15-C		
FL261-00P-H-A104035AB	56643	Wind Zone III	Manual		Date:
			R		

Mobile Home Permit Worksheet

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Q

size

16" x 16"

18 1/2" x 18 1/2" (342)

20" x 20" (400)

22" x 22" $(484)^*$

24" X 24"

26" x 26" (676)

(576)*

(256)

PIER SPACING TABLE FOR USED HOMES

wall openings 4 foot or greater. Use this symbol to show the piers. Draw the approximate locations of marriage PIER PAD SIZES 6 X/4 POPULAR PAD SIZES 3/16 x 25 3/16 7 1/2 x 25 1/2 1/4 x 26 20 x 20 8.5 x 18. Pad Size 16 x 22.5 16 x 18 16 x 16 446 360

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer

4 ft 5ft

26 x 26

0/6

ANCHORS

Pier pad size

within 2' of end of home spaced at 5' 4" oc

FRAME TIES

Marriage wall Shearwall Sidewall ongitudina OTHER TIES



Mobile Home Permit Worksheet

ig Lettille AAOI VIII GGE	Application Number: Date:
	Site Preparation
ET PENETROMETER TEST	Site Preparation
are rounded down to psf lb. soil without testing.	Debris and organic material removed Water drainage: Natural Swale Pad Other
	Fastening multi wide units
NOTITY NOTITY	Floor: Type Fastener: lass Length: Scil Spacing: 1/6 (
NETROMETER TESTING METHOD	Type Fastener: 10.35 Length: 4 (
imeter of the home at 6 locations.	will be centered over the peak of the roof and fastened with galv.

POCKET PENETROMETER TESTING METHOD

or check here to declare 1000 The pocket penetrometer tests

POCK

× 000

- Test the perimeter of the home at 6 locations.
- 2. Take the reading at the depth of the footer.
- Using 500 lb. increments, take the lowest reading and round down to that increment.
- A 000 ω × (0000

COOLX

of tape will not serve as a gasket.

Type gasket FOO IM

a result of a poorly installed or no gasket being installed. I understand a strip

Installer's initials 🖞 .5

Installed

I understand a properly installed gasket is a requirement of all new and used

Gasket (weatherproofing requirement)

roofing nails at 2" on center on both sides of the centerline

homes and that condensation, mold, meldew and buckled marriage walls are

TORQUE PROBE TEST

The results of the torque probe test is 20° inch pour here if you are declaring 5' anchors without testing . showing 275 inch pounds or less will require 5 foot anchors. inch pounds or check

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft reading is 275 or less and where the mobile home manufacturer may anchors are required at all centerline tie points where the torque test requires anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

Connect electrical conductors between multi-wide units, but not to the main-power This includes the bonding wire between mult-wide units. Pg.

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 2-8

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg.

0	₹	0
alled so as not to allow intrusion of m	lled to manufacturer's specifications.	e repaired and/or taped.
2	o	b
)	3	₹.
2	ar	å
3	Ĕ	20
2	ac	D
5	ë	0
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5	L'S	g
•	S	ed
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1	0	\preceq
2.	S.	Yes
5	ati	
)	9	0
,	S.	1

Weatherproofing

Between Floors Yes Between Walls Yes Bottom of ridgebeam

Yes

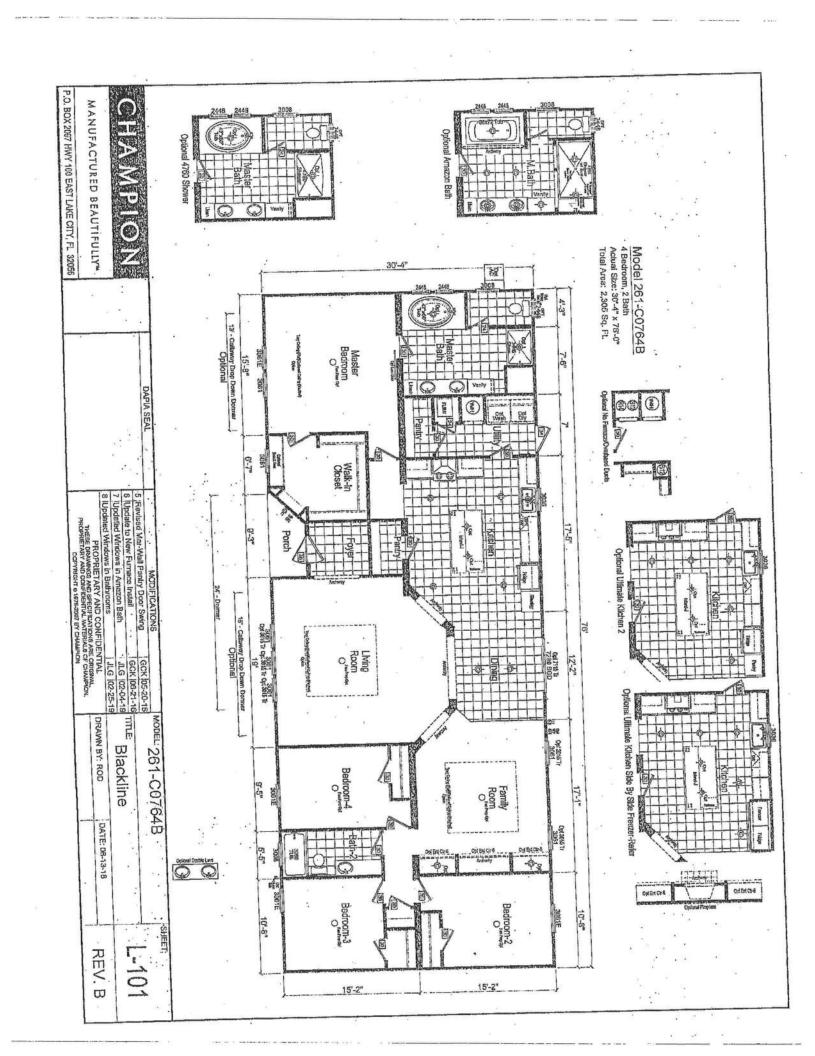
Miscellaneous

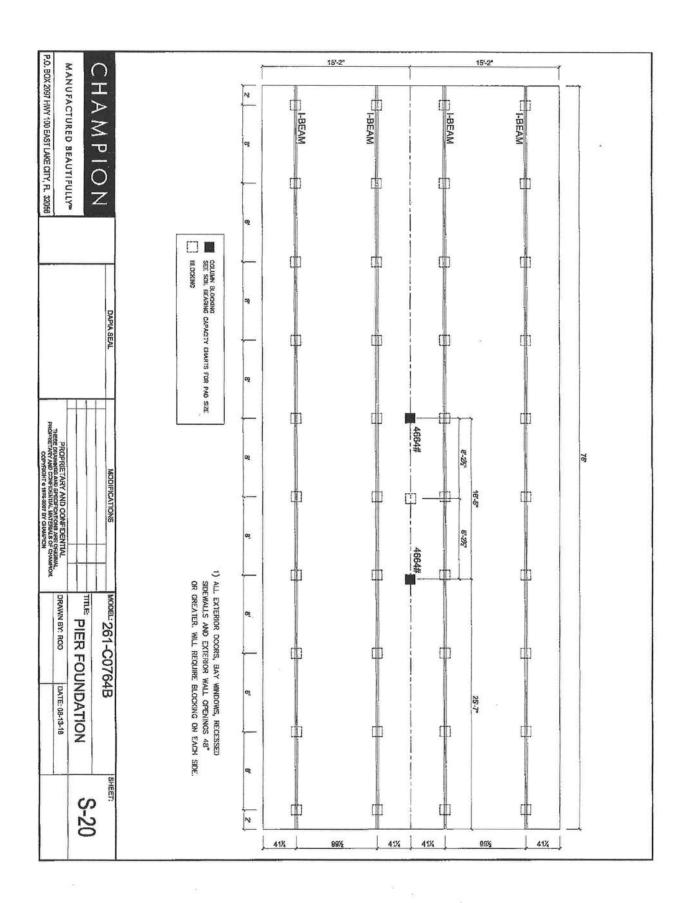
Range downflow vent installed outside of skirting. Skirting to be installed. Yes Other: Electrical crossovers protected. Yes Drain lines supported at 4 foot intervals. Yes Dryer vent installed outside of skirting. Yes No Yes NA NA

manufacturer's installation instructions and or Rule 15C-1 & 2	is accurate and true based on the	nstaller verifies all information given with this permit worksheet
--	-----------------------------------	--

Installer Signature Lovert Shupperd

Date 2.23-22





Single Double 1 Triple
HUD Label #:
Soil Bearing / PSF: 000
Torque Probe / in-lbs: 290 Permit #:
The second secon

STATE OF FLORIDA INSTALLATION CERTIFICATION LABEL

86643

LABEL#

DATE OF INSTALLATION

ROBERT D. SHEPPARD

NAME

IH / 1025386 / 1

5213

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325 AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES.

INSTRUCTIONS

PLEASE WRITE DATE OF INSTALLATION AND AFFIX LABEL NEXT TO HUD LAB USE PERMANENT INK PEN OR MARKER ONLY. COMPLETE INFORMATION ABOVE AND KEEP ON FILE FOR A MINIMUM OF 2 YEA YOU ARE REQUIRED TO PROVIDE COPIES WHEN REQUESTED.

